

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0551-0032

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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration  
Submitted  
with Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing surcharge  
(37 CFR 1.16 (e))  
required

Attorney Docket Number UTL-00479

First Named Inventor Troy Curtiss

**COMPLETE IF KNOWN**

Application Number To Be Assigned

Filing Date February 22, 2002

Art Unit To Be Assigned

Examiner Name To Be Assigned

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Accessory Interface System

(Title of the invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.



[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.

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Approved for use on 10/31/2001 by the U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE.

**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label		OR <input checked="" type="checkbox"/>		Correspondence address below	
Name <b>Kyocera Wireless Corp., Attn: Patent Department</b>							
Address <b>PO Box 928289</b>							
City <b>San Diego</b>		State <b>CA</b>		ZIP <b>92192-8889</b>			
Country <b>USA</b>		Telephone <b>858-882-2000</b>		Fax <b>858-882-3850</b>			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/>				A petition has been filed for this unsigned inventor			
Given Name <b>Troy</b>				Family Name <b>Curtiss</b>			
(first and middle (if any))				or Surname			
Inventor's Signature 				Date <b>2/22/02</b>			
Residence: City <b>Erie</b>		State <b>CO</b>		Country <b>USA</b>		Citizenship <b>USA</b>	
Mailing Address <b>1618 Tanaka Drive</b>							
City <b>Erie</b>		State <b>CO</b>		ZIP <b>80516</b>		Country <b>USA</b>	
NAME OF SECOND INVENTOR: <input type="checkbox"/>				A petition has been filed for this unsigned inventor			
Given Name <b>Brad</b>				Family Name <b>Lemley</b>			
(first and middle (if any))				or Surname			
Inventor's Signature 				Date <b>2/22/02</b>			
Residence: City <b>Lafayette</b>		State <b>CO</b>		Country <b>USA</b>		Citizenship <b>USA</b>	
Mailing Address <b>1251 Mercury Drive</b>							
City <b>Lafayette</b>		State <b>CO</b>		ZIP <b>80026</b>		Country <b>USA</b>	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0681-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	To Be Assigned
Filing Date	February 22, 2002
First Named Inventor	Troy Curtiss
Title	Access Interface
Group Art Unit	To Be Assigned
Examiner Name	To Be Assigned
Attorney Docket Number	UTL 00179

I hereby appoint:

☐ Practitioners at Customer Number  OR☒ Practitioner(s) named below:Place Customer  
Number Bar Code  
Label here

Name	Registration Number
William J. Kolgraff	41,125
Lester J. Anderson	45,833
Manuel F. de la Cerra	45,776

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number 


OR

Place Customer  
Number Bar Code  
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Kyocera Wireless Corp., Attn: Patent Department		
Address	PO Box 928289		
Address			
City	San Diego	State	CA Zip 92192-8289
Country	USA		
Telephone	858 / 882 - 2000	Fax	858 / 882 - 3650

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).**SIGNATURE of Applicant or Assignee of Record**

Name	Troy Curtiss
Signature	
Date	February 22, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

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Please type a plus sign (+) inside this box → ☐

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	To Be Assigned
Filing Date	February 22, 2002
First Named Inventor	Troy Curtiss
Title	Accessories Interface System
Group Agent	To Be Assigned
Examiner Name	To Be Assigned
Attorney Check Number	UTL 00179

I hereby appoint:

- ☐ Practitioners at Customer Number
- OR
- ☒ Practitioner(s) named below:

Place Customer  
Number Bar Code  
Label here

Name	Registration Number
William J. Kolegraff	41,125
Lester J. Anderson	45,833
Manuel P. de la Cerra	45,773

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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- The above-mentioned Customer Number.

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- ☐
- Practitioners at Customer Number
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OR

Place Customer  
Number Bar Code  
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Kyocera Wireless Corp., Attn: Patent Department		
Address	PO Box 928289		
Address			
City	San Diego	State	CA
Country	USA	Zip	92192-8289
Telephone	858 / 882 - 2000	Fax	858 / 882 - 3650


I am the:

- ☒
- Applicant/Inventor.

- ☐
- Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form TO/ISB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Brad Lemley
Signature	
Date	February 22, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

- ☒
- Total of 2 forms are submitted.

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